

Name of employee (last, first, middle)	
Agency	
Division / Unit	Account

## **INSTRUCTIONS:**

- (1) This form should be used by state employees not eligible for premium overtime compensation.
- (2) This form should be maintained by and is the responsibility of the employee.
- (3) When compensatory time is earned or used, it should be indicated on the employee's attendance report. Submit a copy of this form to your payroll clerk with the attendance report.
- (4) A maximum of three weeks of compensatory time may be used in a calendar year.
- (5) Compensatory time unused upon termination or transfer is forfeited.
- (6) Generally, only overtime work segments of four hours or more may be earned.
- (7) All time earned should be rounded to the nearest one-half hour.
- (8) Compensatory time off must be used in whole or half day segments.
- (9) A computer spreadsheet which mirrors this format may be used in lieu of this form.

For detailed instructions, consult Budget Agency Financial management Circular 87-2.1.

DATE COMP. TIME EARNED OR USED	DESCRIPTION OF WORK PERFORMED	APPROVAL SUPVS. INITIALS	APPROVED TIME EARNED	APPROVED TIME USED	BALANCE ACCUM. HOURS
Balance forwarded from prior wooksheet:					